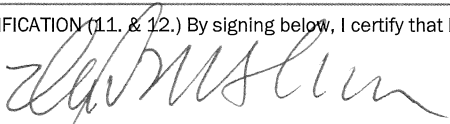


Clear Form

| UNITED STATES DISTRICT COURT<br>NORTHERN DISTRICT OF CALIFORNIA<br>CAND 435<br>(CAND Rev. 7/2013)  |                     |                    |  | <b>TRANSCRIPT ORDER</b><br>Please use one form per court reporter.<br><i>CJA counsel please use Form CJA24</i><br>Please read instructions on next page.   |                       |                       |  |                                       | COURT USE ONLY<br><b>DUE DATE:</b>     |                       |                       |                                  |                       |                       |                       |
|--|---------------------|--------------------|--|--|-----------------------|-----------------------|--|---------------------------------------|--|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|
| 1a. CONTACT PERSON FOR THIS ORDER<br><b>Raphael Goldman</b>  |                     |                    |  | 2a. CONTACT PHONE NUMBER<br><b>(510) 845-3000</b>  |                       |                       | 3a. CONTACT EMAIL ADDRESS<br><b>goldman@achlaw.com</b> |                                       |  |                       |                       |                                  |                       |                       |                       |
| 1b. ATTORNEY NAME (if different)<br><b>(same)</b>  |                     |                    |  | 2b. ATTORNEY PHONE NUMBER  |                       |                       | 3b. ATTORNEY EMAIL ADDRESS                             |                                       |  |                       |                       |                                  |                       |                       |                       |
| 4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)<br><b>Arguedas, Cassman &amp; Headley, LLP</b><br><b>803 Hearst Avenue</b><br><b>Berkeley, CA 94710</b>        |                     |                    |  | 5. CASE NAME<br><b>U.S. v. FedEx Corp. et al</b>   |                       |                       |  | 6. CASE NUMBER<br><b>14-380 (CRB)</b> |  |                       |                       |                                  |                       |                       |                       |
|  |                     |                    |  | 8. THIS TRANSCRIPT ORDER IS FOR:<br><input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached)<br><input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL <input checked="" type="checkbox"/> CJA: Do not use this form; use Form CJA24 |                       |                       |  |                                       |  |                       |                       |                                  |                       |                       |                       |
| 7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input type="checkbox"/> FTR<br><b>Rhonda Aquilina</b>   |                     |                    |  |  |                       |                       |  |                                       |  |                       |                       |                                  |                       |                       |                       |
| 9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:                  |                     |                    |  |  |                       |                       |  |                                       |  |                       |                       |                                  |                       |                       |                       |
| a. HEARING(S) (OR PORTIONS OF HEARINGS)  |                     |                    |  | b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)   |                       |                       |  |                                       | c. DELIVERY TYPE (Choose one per line) |                       |                       |                                  |                       |                       |                       |
| DATE   | JUDGE<br>(initials) | TYPE<br>(e.g. CMC) | PORTION<br>If requesting less than full hearing,<br>specify portion (e.g. witness or time) | PDF<br>(email)   | TEXT/ASCII<br>(email) | PAPER                 | CONDENSED<br>(email)                                   | ECF ACCESS<br>(web)                   | ORDINARY<br>(30-day)                   | 14-Day                | EXPEDITED<br>(7-day)  | DAILY<br>(Next day)              | HOURLY<br>(2 hrs)     | REALTIME              |                       |
| 09/24/2014   | CRB                 | Status             |  | <input checked="" type="radio"/>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|  |                     |                    |  | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|  |                     |                    |  | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|  |                     |                    |  | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|  |                     |                    |  | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|  |                     |                    |  | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                                  | <input type="radio"/>                 | <input type="radio"/>                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:   |                     |                    |  |  |                       |                       |  |                                       |  |                       |                       |                                  |                       |                       |                       |
| ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).   |                     |                    |  |  |                       |                       |  |                                       |  |                       | 12. DATE              |                                  |                       |                       |                       |
| 11. SIGNATURE   |                     |                    |  |  |                       |                       |  |                                       |  |                       | 12/2/2014             |                                  |                       |                       |                       |
| DISTRIBUTION: <input type="checkbox"/> COURT COPY <input type="checkbox"/> TRANSCRIPTION COPY <input type="checkbox"/> ORDER RECEIPT <input type="checkbox"/> ORDER COPY |                     |                    |  |  |                       |                       |  |                                       |  |                       |                       |                                  |                       |                       |                       |